OPERATION IRAQI FREEDOM

Post-Combat Recovery & Reintegration: Strengthening Military Members and Their Families



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Disclaimer

While data from the Department of Defense will be presented, the opinions expressed are those of

LT COL Charles E. Woods

and do not necessarily represent those of the Department of Defense, any specific Branch of Service, the National Guard, or DHHS/SAMHSA.

Objectives

- Describe the existing Support Systems for Combat Veterans and family members;
- Outline the type Support Services that should be provided and describe how they are normally organized.

Focus

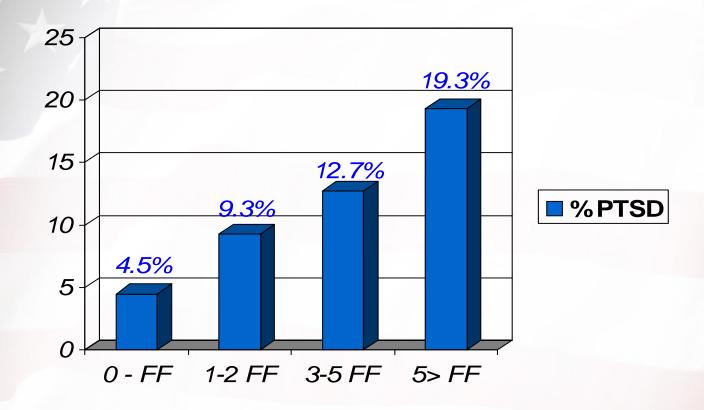
Our Main Focus is on the Warrior

- Varied Psychological Responses to Combat
- Warrior Transition: Resilience after Combat
- Provider services for Reintegration and Support

- First sustained ground combat undertaken by the US since Vietnam.
- More OIF troops have seen heavy combat than in recent wars.
- 90% of OIF Warriors have been exposed to a firefight.
- 94% have seen dead bodies or human remains.

 Strong reported relationship between combat experiences, such as being shot at, handling dead bodies, knowing someone who was killed, or killing enemy combatants, and the prevalence of PTSD.

Prevalence of PTSD and Number of Firefights



- Of those who met the screening criteria for a mental disorder,
 - only 38 to 45 % indicated an interest in receiving help, and only
 - only <u>23 to 40 %</u> reported having received professional help in the past year.
- "Outreach is obviously is a vital component of any service program."

Perceived barriers to getting Help:

- 65% "I would be seen as weak"
- 63% "unit leaders will treat me different"
- 59% "peers would be less confident in me"
- 51% "my leaders would blame me"
- 50% "It would harm my career"

Medical Threats for the Region

- Threat Categories
 - Infectious
 - Vector borne
 - Animal associated
 - Environmental

- Diarrheal diseases
- Tuberculosis
- Malaria
- Dengue
- Meningococcal Meningitis
- Leishmaniasis
- Q-Fever
- Rabies
- Sandfly Fever
- Schistosomiasis
- Typhoid/Paratyphoid
- Typhus
- Boutonneuse Fever
- West Nile Fever
- Leptospirosis

Emotional Threats

- Many times, warriors report that having access via phone and e-mail is a blessing and a curse at the same time!
- Hearing from home and loved ones can boost morale, but at the same time, because of home "daily hassles", warriors report that it's hard to "keep their head in the fight".

In-Theater Assistance

- Every Combatant in OIF has access to ongoing Medical Care, to include Psychologists, Social Workers, Psychiatric Nurses, and Mental Health Technicians.
- Combat Stress Control Teams are located throughout the area, and are called in to provide CISM services when needed.

Warrior Transition (Physical) Post Deployment Requirements

- Post-Deployment Health Assessment
- In-Theater Briefings on:
 - Health
 - PTSD
 - Family Reunion
 - Reintegration
 - Personal Resilience
 - Treatment available after Deployment

Warrior Transition (Physical) Post Deployment Requirements

- In-theater
 - Receive post-deployment medical threat briefing
 - Complete Post-Deployment Health Assessment (DD Form 2796)
 - Receive post-deployment medical screening (of 2796), testing, and follow-up
 - Understand where to go for health problems or concerns after returning home
- Home Station
 - TB skin test, blood draw and referral appointments

Warrior Transition (Physical) Preventive Measures Required

- Tuberculosis Skin Test
 - A skin test on the forearm to show if you have been exposed to tuberculosis
 - Delayed onset of positive test in some folks requires that you be tested twice:
 - At the time of redeployment
 - At 3-6 months after redeployment (Date will be indicated on your DD Form 2796)
 - Must return 48-72 hours after the test to have it read and documented by a health care professional
- Blood sample taken at home station

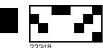
Warrior Transition (Physical) Post Deployment Health Assessment Form

- DD Form 2796 <u>must</u> be completed no more than 30 days prior to departing for home station
- Page 1: Administrative information
 - Deployment location
 - Country, list all
 - Operation Iraqi Freedom

Must have DD 2796 in hand to depart from theater

Post-Deployment Health **Assessment Form**

Page 1: Service Member **Administrative** Information



POST-DEPLOYMENT

Health Assessment

Authority: 10 U.S.C. 136 Chapter 55. 1074f, 3013, 5013, 8013 and E.O. 9397

Principal Purpose: To assess your state of health after deployment outside the United States in support of military operations and to assist military healthcare providers in identifying and providing present and future medical care to you.

Routine Use: To other Federal and State agencies and civilian healthcare providers, as necessary, in order to provide necessary

Disclosure: (Military personnal and DoD civilian Employees Only) Voluntary. If not provided, healthcare WILL BE furnished, but comprehensive care may not be possible.

INSTRUCTIONS: Please read each question completely and carefully before marking your selections. Provide a response for each question. If you do not understand a question, ask the administrator

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Demographics	3			
Last Name First Name Name of Your	Unit or Ship during this Dep	MI		Today's Date (dd/mm/yyyy) Social Security Number DOB (dd/mm/yyyy)
Gender O Male O Female	Service Branch O Air Force O Army O Coast Guard O Marine Corps O Navy O Other	Component O Active Duty O National Guard O Reserves O Civilian Government	ent Employee	Date of arrival in theater (dd/mm/yyyy) Date of departure from theater (dd/mm/yyyy) Pay Grade O E1 O OO1 O W1
(mark all that a	Operation O Australia O Africa O Central America O Unknown were you mainly deployed: apply - list where/date arrive	O South America O North America O Other		O E2 O O02 O W2 O E3 O O03 O W3 O E4 O O04 O W4 O E5 O O05 O W5 O E6 O O06 O E7 O O07 O Other O E8 O O08 O E9 O O09 O O10
O Kuwait O Qatar O Afghanistan O Bosnia O On a ship Name of Opera Occupational s (MOS, NEC or	specialty during this deploym AFSC)	nent	O Iraq O Turkey O Uzbekistai O Kosovo O CONUS O Other	Administrator Use Only Indicate the status of each of the following: Yes No N/A O O Medical threat debriefing completed O O Medical information sheet distributed O O Post Deployment serum specimen collected
i i				Reset



DD FORM 2796, APR 2003

PREVIOUS EDITION IS OBSOLETE.





Warrior Transition (Physical) Post Deployment Health Assessment Form

- Page 2: Service Member Report
 - Report vaccinations, medications, and health care during deployment process
 - Report experiences, symptoms or concerns
- Page 3: Service Member Report
 - Report possible exposures and duration
 - Identify potentially hazardous situations that may concern you
 - *Must have DD 2796 to out-process from theater*

Warrior Reintegration (Physical) Post Deployment Health Assessment Form

Please answer all questions in I	relatio	on to	THI.	S deployment
Did your health change during this deployment? Health stayed about the same or got better Health got worse	O Sm O An O Bot	uring this de nallpox (leaves thrax tulism	ployme	
How many times were you seen in sick call during this deployment? No. of times	O Oth	eningococcal her, list: n't know		
3. Did you have to spend one or more nights in a hospital as a patient during this deployment?		ou take any		following medications
		all that apply		
O No				nide) nerve agent pill
O Yes, reason/dates:		ark-1 antidote		
	O An	ti-malaria pills		
				h as dexedrine
		her, please lis		
	O Do	n't know		
Do you have any of these symptoms now or d	lid you de	velop them	anyti	me during this deployment?
No Yes During Yes Now	No	Yes During	Yes No	<u>w</u>
O O Chronic cough	0	0	0	Chest pain or pressure
O O Runny nose	ŏ	ŏ	_	Dizziness, fainting, light headedness
O O O Fever	õ	ŏ		Difficulty breathing
O O Weakness	O	Ö	_	Still feeling tired after sleeping
O O Headaches	0	O	0	Difficulty remembering
O Swollen, stiff or painful joints	0	0		Diarrhea
O O Back pain	0	0		Frequent indigestion
O O Muscle aches	0	0	0	
O Numbness or tingling in hands or feet	0	0	0	Ringing of the ears
O O Skin diseases or rashes				
O O Redness of eyes with tearing O Dimming of vision, like the lights				
O O Dimming of vision, like the lights were going out				
7. Did you see anyone wounded, killed or dead during this deployment? (mark all that apply) No O Yes - coalition O Yes - enemy O Yes - divilian	emo	otional, alcoh		ested in receiving help for a stress, amily problem?
- is statistical and analy a loss at the state of the sta		- 4b - 1 A CT -	14/55	VC
				KS, how often have you of the following problems?
8. Were you engaged in direct combat where you discharged	None		A Lot	
your weapon?	0	0	0	Little interest or pleasure in doing things
O No O Yes (O land O sea O air)	0	0	0	Feeling down, depressed, or hopeless
During this deployment, did you ever feel that you were in great danger of being killed?	0	0	0	Thoughts that you would be better off dead or hurting yourself in some way
O No O Yes				33348
				Reset

		orrible,	or upsett	ence that was so ing that, IN THE	15.	On how many days did you wear your MOPP over garments?			
No	Yes								
0	0			htmares about it or thought u did not want to?	16.	How many times did you put on your gas mask because of alerts and			
0	0		d hard not to think about it or went out of way to avoid situations that remind you?			NOT because of exercises? No. of ti			
0	0	Were o		on guard, watchful, or easily					
0	0		mb or deta r surroundir	ched from others, activities, ngs?	17.	Were you in or did you enter or closely inspect and destroyed military vehicles?			
						O No O Yes			
No O		Unsure	You may	have serious conflicts spouse, family members,	18.	Do you think you were exposed to any chemical, biological, or radiological warfare agents during the deployment?			
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Warrior Transition (Physical) Post Deployment Health Assessment Form

- Page 4: Health Assessment
 - Face-to-face discussion with Health Care Provider (HCP)
 - Answer based on how you are feeling today
 - Review of completed DD 2796 with HCP
 - Follow-up may be recommended at home station
 - Answering <u>yes</u> to any questions will not delay your departure from theater

Must Hand-carry a copy of DD 2796 all the way through home station out-processing

Post-Deployment Health **Assessment Form**

Page 4: Health **Care Provider Assessment**

Health Care Provide	er Only ember's social security	#	
Post-Deployment Health Care Provider	Review, Interview, and As	ssessment	
Interview			
1. Would you say your health in general is:		O Excellent O Very Good O Good	d O Fair O Poor
2. Do you have any medical or dental probl	ems that developed during th	is deployment?	O Yes O No
3. Are you currently on a profile or light du	ty?		O Yes O No
4. During this deployment have you sought health?	O Yes O No		
Do you have concerns about possible ex your health? Please list concerns:	posures or events during this	deployment that you feel may affect	O Yes O No
6. Do you currently have any questions or Please list concerns:	concerns about your health?		O Yes O No
-			
Health Assessment			
		m, there is a need for further evaluation as indicoumentation of the problem evaluation to be pl	
REFERRAL INDICATED FOR:		EXPOSURE CONCERNS (During	donlovmont):
None	O GI	EXT GOOKE GOINGERING (During	deployment).
Cardiac	O GU	O Environmental	
Combat/Operational Stress Reaction	O GYN	O Occupational	
D Dental	O Mental Health	O Combat or mission re	ated
D Dermatologic	O Neurologia	O None	
) ENT	O Orthopedic		
) Eye	O Pregnancy		
D Family Problems	O Pulmonary		
D Fatigue, Malaise, Multisγstem complaint	O Other		
O Audiology			
Comments:			
-			
I certify that this review process has been c Provider's signature and stamp:	ompleted.	This visit is coded	l by V70.5 6
		Date (dd/mm/yyyy)	/
End of Health Review		3 85 87	2783 28
DD FORM 2796, APR 2003		ASD(HA) APPROVED	33348







How to Implement a Program

- All service provider programs should include at a minimum:
 - Individual treatment with therapists welltrained in PTSD issues, and CBT.
 - Group support modalities that emphasize and encourage help-seeking behaviors, such as Peer-Support.
 - Family support and training modalities that emphasize recognizing traumatic stress symptoms and referral options.

- <u>Telling</u> "The Story" (Where you've been)
 - (-) Negative Experiences:
 - Poor Conditions
 - Witnessing Innocent Civilian Deaths
 - Loss of Fellow Warrior
 - Firefights
 - Mortar Shelling
 - Sleepless Nights, etc.

- <u>Telling</u> "The Story" (Where you've been)
 - (+) Positive Experiences:
 - Camaraderie,
 - Successful Campaigns,
 - Saving Lives,
 - Relationship with Iraqi Children, etc.

- <u>Living</u> "The Story" (Emotions)
 - (-) Negative Feelings: Anger or Guilt:
 - "I wasn't courageous enough"
 - "I could have saved his life"
 - "I should have done something else and I didn't"
 - "Now I have to live with that"
 - Fears of returning home, etc.

- <u>Living</u> "The Story" (Emotions)
 - (+) Positive Feelings:
 - Happy about returning home (spouse, children, home.)
 - Glad to be getting out of the desert.
 - Looking forward to a decent meal, bed, environment.
 - Looking forward to having a normal life back home.
 - Returning home to a new job/car/relationship.

- <u>Creating</u> "The Story Not Yet Written"
 - Career and Work Plans
 - Personal and Professional Development
 - Building Strong Healthy Relationships
 - Total Fitness: Body, Mind, Spirit

"Failure to Plan, means Planning to Fail". Where Do You Want to Go?

- Listening to "Our Story"
 - Taking Care of Our Own
 - <u>Listen</u>: Listen to other's stories...
 - Observe: Stories are told by behaviors:
 - Crumbling Relationships,
 - Late for work,
 - Reports of abuse,
 - Radical changes in behavior,
 - Loneliness, Addictions, Rage, Depression, Sleeplessness

Elements of <u>Family</u> Transition (Reunion - Reintegration)

- Preparation is key
 - Communicate
 - Readjusting to family life can be stressful
 - Reintegration into the family is a gradual process and requires patience
 - Anxiety and worries are normal
 - There are resources to help you and your family during your reunion

- Understanding <u>Yourself</u>:
 - Prior to and during the deployment you have been:
 - Focused on the mission
 - Developing unit cohesion & lasting friends
 - Helping other oppressed nations get food, aid, or medicine.
 - Keeping in contact with your family.

- Understanding <u>Yourself</u>:
 - During deployment, you may have felt:
 - Anxiety and varying levels of stress
 - Concern for your family
 - Disconnected from your family
 - Uneasy about what you have seen or experienced.

- Understanding <u>Yourself</u>:
 - Now that you are home you probably feel:
 - Excited about leaving a foreign country
 - Happy about being with your family again
 - Glad to be going back to "normal" (back to the USA)
 - Thrilled about a decent meal, bed, and being home.

- Understanding <u>Yourself</u>:
 - After returning home, you may:
 - Experience sleep disturbances
 - Feel claustrophobic
 - Be "on guard" or "scanning the area"
 - Feel overwhelmed by everyday noise and confusion
 - Have jetlag or experience culture shock.

- Understanding <u>Yourself</u>:
 - <u>Upon being home</u>, you may:
 - Feel hurt when your children are afraid of you
 - Find your whole family routine is changed
 - Be stand-offish from those you care about
 - Anxious about intimacy
 - Not want to talk about your deployment.

- Understanding <u>The Family</u>:
 - During deployment, your family (spouse) may have:
 - Experienced changes
 - Felt stressed or overwhelmed
 - Held down the fort with added responsibilities
 - Experienced a temporary relocation
 - Become involved in different activities or made new friends

- Understanding <u>The Family</u>:
 - <u>During reunion</u>, your spouse may:
 - Have idealistic expectations
 - Be eager to socialize as a couple again
 - Want to host a celebration or go out for dinner
 - Immediately hand over the "honey do" list
 - Feel concern that their "Warrior" has changed
 - Wonder if their accomplishments will be appreciated
 - Fear losing independence
 - Want you to talk about combat experiences
 - Expect promises to be kept

- Understanding <u>The Family</u>:
 - Reuniting:
 - Take time to become reacquainted
 - Recognize that things may be different
 - Talk with each other about your experiences
 - Support your spouse and what they have done-don't criticize
 - Remember that intimate relationships may be awkward at first
 - Go slowly don't try to make up for lost time

- Understanding <u>The Family</u>:
 - Reuniting:
 - Take time to become reacquainted
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 - Remember that intimate relationships may be awkward at first
 - Go slowly don't try to make up for lost time

- Understanding <u>The Family</u>:
 - During deployment you children may have:
 - Been sad, fearful, confused, or angry
 - Regressed in behavior
 - Think they may have caused the separation
 - Become attached to your spouse
 - Changed and grown
 - Started new activities
 - Developed new friendships

- Understanding The <u>Family</u>:
 - During Reunion:
 - Babies may cry when you first hold them
 - Toddlers may not recognize you
 - Preschoolers may be afraid of you
 - School age children may be very demanding of your time
 - Teenagers may seem moody or act as it they don't care
 - Children may have symptoms of minor illness
 - Children may be torn by loyalties

- During Reintegration:
 - Slowly resume old rules and routines
 - Be available to your child, with time and emotions
 - Let the child be the first to renew the bond
 - Expect some changes in your child
 - Focus on successes; limit criticism
 - Encourage your child to tell you everything that happened



http://www.tricare.osd.mil/



Address (a) http://www.va.gov/

Department of Veterans Affairs

Hot Topics

 FY 2006 Budget **Proposal**

Online Applications

- Compensation & Pension
- Education
- Health Eligibility
- My Health eVet
- Vocational Rehab & **Employment Services**

Special Programs

- Accessibility
- Homeless Veterans
- Military Services
- Minority Veterans
- Women Veterans

Today's VA

- About VA
- Congress
- Job Opportunities
- Partners

How May We Serve You?

Burial







Iraqi Freedom









Insurance

Program

Life









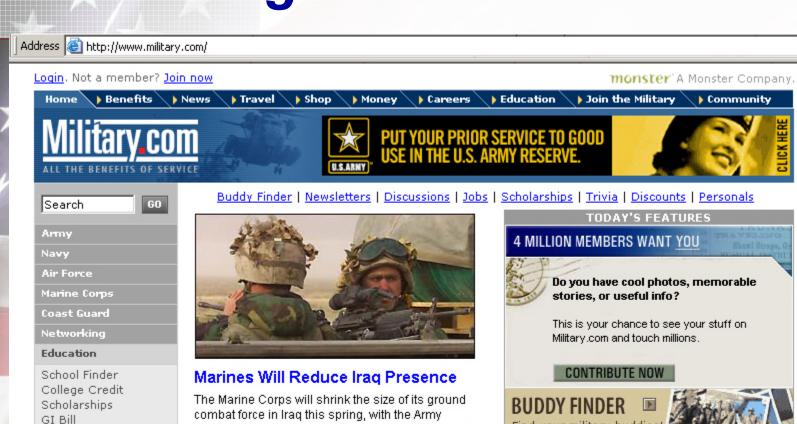




http://www.va.gov/



http://www.pdhealth.mil/veterans/vet_resources.asp



TODAY'S HEADLINES >>

Money

Military Pay

VA Loans Insurance Deals

Relocation

Car Buying

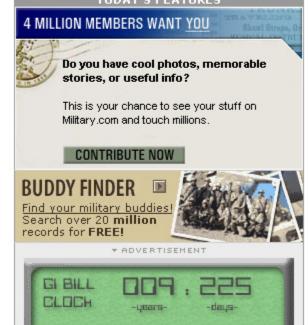
Militany Discounts

Homeless Vets Buried With Full Honors

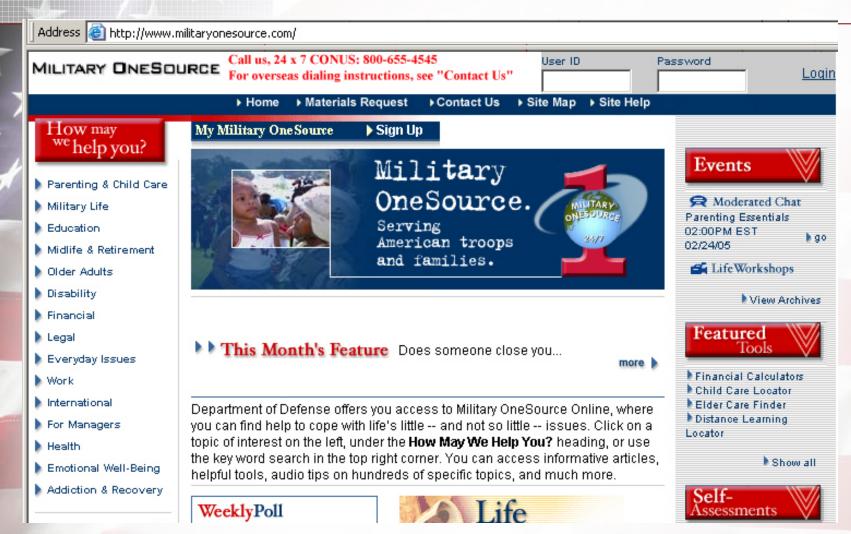
making a corresponding increase. The Marines will

drop from about 33,000 to about 23,000. More...

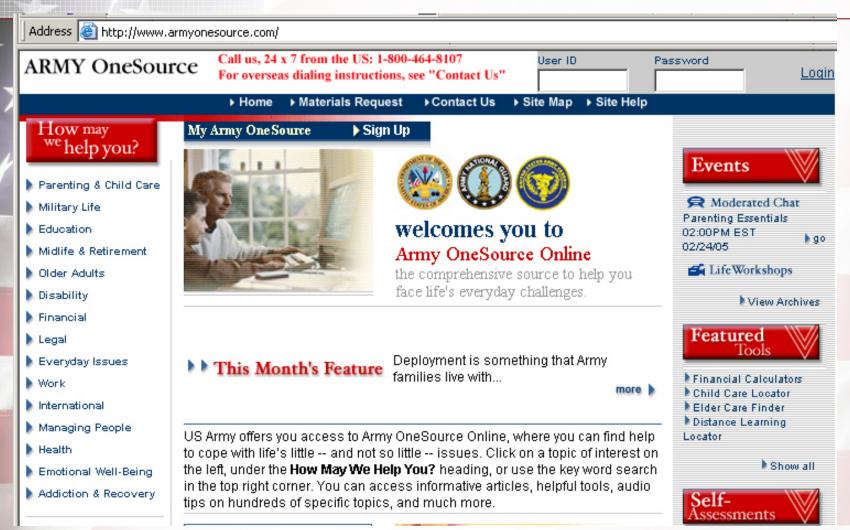
- Rumsfeld Meets With Troops In Iraq
- Army Life: Long Hours, Some Comforts



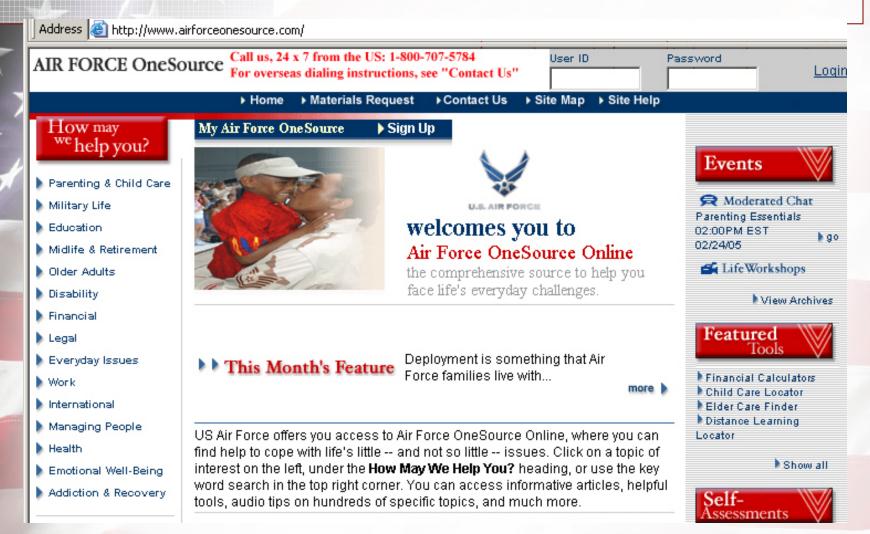
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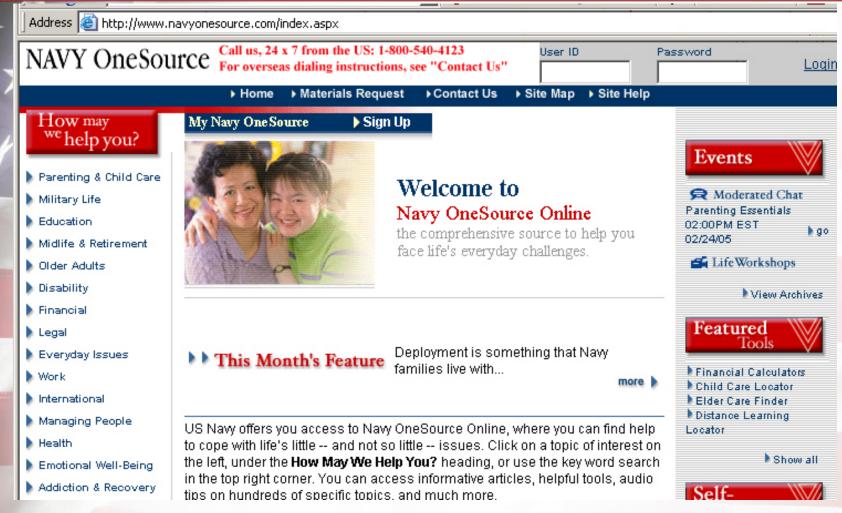
http://www.militaryonesource.com/



http://www.armyonesource.com/



http://www.airforceonesource.com/



http://www.navyonesource.com/



http://www.mccsonesource.com/

- Chaplains and Local Clergy
- Military Counseling Services
- Mental Health Services through TRICARE
 www.TRICARE.com or call 1-800-DOD-CARES
- Military Family Team Building Programs
- State Family Program Director
- Unit Family Assistance Groups

- www.tricare.osd.mil
- www.va.gov
- www.pdhealth.mil/veterans/vet_resources.asp
- www.military.com
- www.militaryonesource.com
- www.armyonesource.com
- www.airforceonesource.com
- www.navyonesource.com
- www.mccsonesource.com

Questions



For more information, you may contact me at charles.woods@tnknox.ang.af.mil or call me at 865-985-3297